



Case Report

Homicide of six family members using multiple methods in Sri Lanka

Nilukshi Abeyasinghe MD DMJ(Lond) (Senior Lecturer)*,
Ravindra Fernando MD FRCP(Lond) (Senior Professor), S. Nirnan MBBS(Cey) DLM (Lecturer)

Department of Forensic Medicine and Toxicology, Faculty of Medicine, University of Colombo, Sri Lanka

ARTICLE INFO

Article history:

Received 29 November 2008

Received in revised form 21 April 2009

Accepted 1 July 2009

Available online 13 August 2009

Keywords:

Homicide

Homicides using multiple methods

Family homicides

ABSTRACT

A family of six members were murdered at their own residence. Four of the family members had been killed with large heavy sharp weapons which produced multiple deep cut injuries predominantly on the neck and face. In these victims, death occurred as a result of haemorrhage. Two family members were killed by ligature strangulation and hanging. The victim, who was hanged, was sexually abused before she was killed. An unusual finding was the presence of an alleged assailant to the murders with multiple blunt weapon trauma to his body, at the scene of crime. The homicides of the family were as a result of personal disputes between the perpetrators who were their neighbours. Three of the alleged assailants were charged for murder and rape. The fourth assailant was charged for rape. No conclusive evidence as to who caused the death of the alleged perpetrator was reached.

© 2009 Elsevier Ltd and Faculty of Forensic and Legal Medicine. All rights reserved.

1. Introduction

Sri Lanka has a high crime rate with homicides accounting for approximately 31.2 per 100,000 population at the time of this incident. Multiple murders however are rare. We report here a unique incident where bodies of six members of the same family, and that of an assailant were found at the scene of crime in the suburbs of the capital Colombo.

Bodies of the father (aged 58) a farmer, the mother (aged 55) a housewife, two employed daughters (aged 28 and 24), an employed son (aged 27) and a daughter studying at university (aged 26) were found at their own house by police who were informed by neighbours. As narrated by the assailants later, the murders were committed in the following sequence (see Table 1).

The body B1 was found in a large wooden chest without clothes and partially covered with a white sarong. He was in a seated position with the head turned to the right and flexed onto the neck. A ligature made of coir rope encircled the neck mostly on the right anterior lateral and posterior sides of the neck and then extended upwards and towards the left to a large knot at the level of the left ear after which it continued outside to a leg of the chest situated below him. His limbs had been tied with a similar type of rope. The body B2 was found near a bush lying face down on the grass. It had been dragged from a location in the house marked by a pool

of blood. The body was clad in a brown blood stained coat and a black pleated skirt. The rest of the inmates of the house were accosted by the assailants and killed as they came home. The body of B3 was discovered in the adjacent corridor, clad in a blood stained sari and blouse, and surrounded by a pool of blood. The body of B4 was found further along the corridor, clad in a blue blood stained dress and surrounded by a pool of blood. The body of B5 who was killed after sexual abuse was found in a partial hanging position from the door of an adjacent room. She was clad in a pink blouse and brown skirt. A white flexible wire around the neck was tied to a rope which had been hung on the upper hinge of the door. The face was markedly congested with hypostasis predominantly in the lower limbs. The ligature mark had an inverted 'V' shaped appearance with underlying contusions of the neck muscles. The hands were tied together behind at the wrists. Evidence for sexual activity prior to her killing included contused labia majora and minora with multiple tears at their lower end, and a fresh tear of the 7 o'clock position of the annular hymen. This was interpreted as evidence of recent penetration into the vagina. Further, injuries of restraint were seen as fresh contusions around the back of both wrists, above the medial side of the left ankle and an abrasion in the midline of the lower back region. The body of B6 was found in the lawn outside. He had been placed within a pit, clad in a blood stained white shirt and green trouser. An axe, machete, and sickle were found close to this body.

An alleged perpetrator aged 51 years (B7) was found close to this body. In B7, the following injuries led to death: 18 subcutaneous contusions extending into the deeper muscles were distributed around the posterior chest, left elbow, both glutei thighs, legs and

* Corresponding author. Address: Department of Forensic Medicine and Toxicology, Faculty of Medicine, University of Colombo, 25 Kynsey Road, Colombo 8, Sri Lanka. Tel.: +94 112694016; fax: +94 112691581.

E-mail address: rnabey@eureka.lk (N. Abeyasinghe).

Table 1
Sequence of committing homicides as revealed at the trial.

Body number	Victim	Main injuries	Cause of death
B1	Father (58 years)	Horizontally placed imprint abrasion predominantly on the anterior and right lateral side of the neck, contusions of neck muscles and fractures of the hyoid bone	Strangulation by a ligature
B2	Youngest daughter (24 years)	Deep cut injuries of the face, scalp and neck	Hemorrhage following a deep cut injury to the face and neck
B3	Mother (55 years)	Gaping cut injury extending through the trachea, left carotid artery and left internal jugular vein into the cervical spine	Hemorrhage following deep cut injuries to the neck
B4	Eldest daughter (28 years)	Deep cut injury extending through the left carotid artery and left internal jugular vein, cervical spine and spinal cord, and other cut injuries to face, head and neck	Hemorrhage following deep cut injuries to the neck
B5	Second daughter (26 years)	Imprint abrasion of the upper one third of the neck and fresh tears in the hymen suggestive of recent vaginal penetration	Hanging
B6	Son (27 years)	Deep cut injury extending through the left jugular vein, left carotid artery, thyroid gland and cartilage and other stab injuries to head, neck, chest and abdomen	Hemorrhage following a deep cut injury to the neck

ankles. Additional injuries included encircling imprint abrasions 12 cm × 1 cm, and 8 cm × 1 cm around the left wrist and right wrist, respectively. There were other smaller abrasions around these main abrasions in both the hands and wrists. The cause of death was due to extensive intramuscular haemorrhages following blunt weapon trauma to the body.

2. Discussion

The imprint abrasion around the neck in the body of B1 together with the underlying fractures of the hyoid bone suggested constriction of the neck by a ligature. The fractures of the hyoid bone may have occurred during the forcing upwards of the ligature while the victim was kept within the wooden chest or in the struggle between the victim and the assailants as evidenced by the abrasions seen around the left anterior neck and in the regions of the forehead, face, chest, thigh, wrist and abdomen. Fracture of the hyoid bone is uncommon in ligature strangulation when compared with manual strangulation.¹ Fractures are more likely to be seen in older victims² as in this case, and is correlated to the degree of ossification or fusion of the hyoid synchondroses.³ The abrasion at the wrist supported the fact that his hands had been tied. The bodies of B3 and B4 found in the corridor of the house and of B2 and B6 found in the lawn all had deep cut injuries to the neck and face which led to death by extensive blood loss. The length and depth of the injuries produced suggested the use of large sharp heavy weapons such as an axe, machete and sickle knife. Such weapons were located at the scene of crime. The multiplicity of cut injuries and in the case of B6, the additional stab injuries supported the possibility of multiple assailants having used multiple weapons to inflict these injuries. The wide distribution in both accessible and inaccessible sites in these bodies was in keeping with a homicidal injury pattern. The deep cut injury on the anterior neck and the cut injury at the back of the head extending to the occip-

ital bone in the body of B3 had the appearance of chop wounds. Such deep incised wounds of the neck extending to the vertebral column are commonly seen in homicidal wounds inflicted from the rear. The incised wounds on the anterior aspect of the body of B4 were short and angled, in keeping with infliction of homicidal wounds from the front.⁴ There were also deep chop wounds most probably inflicted from the rear. A study on homicidal chop injuries revealed that most cases were due to intentional violence. The common sites where injuries were seen were the neck and head.⁵ In this group, the majority of victims had more than five injuries. The stab injuries not being in a vital area and only superficial together with the cut injury of the face appear to suggest a tendency to mutilate. This is seen in deaths where an element of revenge is present. The victim was known to have had personal disputes with some of the assailants. The body of B2 had a deep chop injury extending across her face in addition to a cut at the back of the neck. The body of B6 too had multiple cuts and stabs distributed across the front and back of the trunk in addition to the chop wounds of the neck. In the body of B5 the presence of the inverted 'V' shaped ligature mark with underlying contusions in the neck muscles together with congestion of the face and hypostasis predominantly in the lower limbs suggested ante mortem hanging. Hanging as a method of homicide is difficult to accomplish, unless there are several assailants present or the victim has been incapacitated by tying the wrists as in this case. Distinguishing suicidal and homicidal hanging too may be difficult to accomplish by examination of the body alone.⁶ As revealed by eye witness evidence at the trial, prior to the hanging, this victim had been sexually abused by many assailants. The physical injuries to support this included the presence of swollen labia with multiple tears and a fresh tear at the 7 o'clock position in the annular hymen both of which were evidence of recent penetration, the latter injury being proof of vaginal penetration. In a study done comparing genital injury patterns in consensual and nonconsensual sexual intercourse, the multiplicity of sites was higher in sexual assaults, the most common regions being the fourchette, labia minora, hymen and fossa navicularis.⁷ The abrasion at the lower back in the midline and the contusion above the ankle could have resulted by force applied ventrally to the victim as a result of there being many assailants. The contusions at the back of both wrists could have occurred as a result of tying both hands together behind the victim. The absence of injuries of resistance is probably due to the fact of her being unable to resist against multiple assailants. In this family, four of the deaths were as a result of sharp weapon trauma resulting in bleeding and two as a result of strangulation and hanging.

The body of the alleged perpetrator (B7) had encircling imprint abrasions around his wrists suggesting that his hands had been tied and he probably could not resist the assaults on his body. All other injuries being contusions suggest assault by one or more blunt weapons. No firm conclusion as to the perpetrator/s of this death was reached. However, allegations involving assault by the police or some others were made by relatives of the deceased assailant. At the conclusion of the trial three of the four alleged assailants were charged for murder of victims B1, B2, B3, B4 and B6, and rape and murder of victim B5. The fourth assailant was charged with rape of victim B4. The assailants did not have any previous criminal histories. The motive for killing stemmed from a long standing feud between this family and the assailants who were neighbours. The assailants had been using land belonging to the family for brewing illicit liquor and there were other disputes over use of their land for community work by the assailant. A case was ongoing between these two groups over the disputes that kept occurring from time to time. The homicides were committed on a day subsequent to one such court hearing. The mother and a daughter had been

killed after their return home from court. Another possible motive for the sexual assault prior to killing was the rejection by the deceased girl, of a relationship with one of the assailants. Three of the four alleged assailants were charged with rape based on eye witness evidence. The autopsies performed assisted in establishing the causes and mechanisms of death, the use of large heavy sharp weapons for the homicides and confirmed the eye witness evidence of the sexual assault.

Conflict of Interest

None declared.

Funding

None declared.

Ethical Approval

The above case trial was concluded and was made available to the public.

References

1. DiMaio VJ. Homicidal asphyxia. *Am J Forensic Med Pathol* 2000;**21**:1–4.
2. Dolinak D, Matshes EW, Lew EO. *Forensic pathology: principles and practice*. Academic Press; 2005.
3. Pollanen MS, Chiasson DA. Fracture of the hyoid bone in strangulation: comparison of fractured and unfractured hyoids from victims of strangulation. *J Forensic Sci* 1996;**41**:110–3.
4. DiMaio VJM, DiMaio DJ. *Forensic pathology*. 2nd ed. CRC Press; 2001.
5. Ong BB. The pattern of homicidal slash/chop injuries: a 10 year retrospective study in University Hospital Kuala Lumpur. *J Clin Forensic Med* 1999;**6**:24–9.
6. Puschel K, Holtz W, Hildebrand E, Naeve W, Brinkmann B. Hanging: suicide or homicide? *Arch Kriminol* 1984;**174**:141–53.
7. Slaughter L, Brown CRV, Crowley SMN, Peck R. Pattern of genital injury in female sexual assault victims. *Am J Obstet Gynecol* 1997;**176**:609–16.